

Trust Board Objectives 12/13

Summary:

The Board met in September 2011 and undertook a SWOT analysis of the organisation, from this review and discussion a draft set of objectives were developed.

These were further developed in consultation with the Executive Team, Investment and Workforce Committee in November 2011 and email correspondence with the wider Trust Board, the resulting final objectives and priorities are attached.

Measures have been identified for each of the priorities, with targets being set in March for monitoring April 2012 onwards.

The agreement of the objectives will enable the BAF to be developed through February and March in preparation for the start of the financial year.

Objective 1 – Deliver Safe, High Quality, Co-ordinated Care

- Achievement of national best practice clinical care
- Ensure patients are cared for in the right place at the right time
- Develop clinical partnerships/Trust Status that provides safe and sustainable services

Objective 2 – Ensure Patients are care for and cared about

- Be recommended on the basis of customer care
- Treat all patients and their family/carers with Compassion, Courtesy and Privacy and Dignity

Objective 3 – Work in partnership

- Work with our patients and partners to develop services that meet the needs of our community
- Improve the way people see and talk about SaSH

Objective 4 – Become a sustainable, effective organisation

- Live within our means both in year and sustainably into the future
- Agree organisation form capable of being FT by 2014
- Listen to, value and develop our workforce

Action: The Board is asked to approve the objectives for 12/13

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Reviewed & Approved by Management Board	Date: NA
Reviewed & Approved by the relevant Board Committee	Date: Draft November 2011

Notes:

Please list number and statement this paper relates to.

Trust objective: To set Trust Objectives

Legal: What are the legal considerations and implications linked to this item?
Please name relevant act

None

Regulation: What aspect of regulation applies and what are the outcome implications? This applies to any regulatory body – key regulators include: Care Quality Commission, MHRA, NPSA & Audit Commission

Impacts on range of regulatory requirements.